

Comment Resolution Document

Washington IMPEP Review FY2022

Email from Lauren Jenks, Assistant Secretary for Environmental Public Health

Washington State Department of Health, Dated June 13, 2022 - **ML22165A245**

Comment No.	Location	Comment	Accepted	Remarks
1	Entire Document, wherever "Harborview" appears	The report identifies the contamination event that occurred on May 2, 2019 as “the Harborview” incident. Harborview is not a licensee of the state of Washington. The licensee was the University of Washington (UW). References to “Harborview” in the draft report should be changed to “University of Washington (UW)”. This includes identifying the building as the University of Washington Research & Training building.	yes	Yes, we will make the change. This should not have a significant impact on the report. Please note that the NNSA Joint Report Identifies the Facility as: University of Washington Harborview Training and Research Facility. In addition, Harborview has been used as a means to identify this event; it's been in the news and known across the industry as the Harborview Event.
2	Section 1, Introduction	In the 3rd paragraph of this section, the report states staff were vacated from their state offices due to a management decision related to the reduction of our carbon footprint. This decision occurred after the state’s governor ordered staff to work from home in March 2020 due to the COVID-19 pandemic.	yes	Yes, we will make the change. We will rewrite the last two sentences as: Following the Governor's order to have staff work from home in March 2020 due to the pandemic, a state level management decision was made to reduce their carbon footprint. This decision resulted in Washington staff being vacated from their offices and working from their residences for the majority of this review period.

3	Section 3.1, Staffing and Training, Page 4 top of page	The State agrees the existing Training & Qualification procedure were not compatible with IMC 1248. The Radioactive Materials Section is actively updating its in-house procedures to be compatible with IMC 1248. Procedure reviews were assigned by Section supervisor. The procedure was waiting to be finalized by program supervisors during a face-to-face meeting. This meeting did not occur during COVID. Because the procedure was not finalized there was no formal training on a procedure change. We have four staff who are not qualified. These newer inspectors/license writers are working within the bounds of the new procedure (self-study/reading, on-the-job training (license writing and inspecting) and required classroom training) and will transition to this program upon procedure approval & formal training.	no	This appears to be informative only. No change to the report. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (the end of the review period) to the MRB.
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4	Section 3.1, Staffing and Training, Page 5, 1st bullet	When discussing Washington's on-the-job training, reference is made to errors identified in other performance indicators. Please provide specific indicators and include a brief description of the issue.	yes	We will substitute the word "errors" with "performance issues." The team found performance issues in the Technical Quality of Inspections and the Technical Quality of Licensing Actions indicators. Specifics are detailed in those sections of the report.
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5	Section 3.1.b, Staffing and Training, Page 5, last paragraph	The subject of this paragraph is refresher training. The paragraph could be written to state the following: “staff met the requirements for refresher training” and conclude with how the requirement was met (supervisor used monthly staff meetings to conduct training).	no	This paragraph is accurate as written. The team does not believe there is a reason to make a change.
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6	Section 3.1.c, Staffing and Training, Page 5, 3rd paragraph	The letter states no training procedure progress had been made since 2018. Washington State has undergone substantial efforts at generating a new IMC 1248-equivalent training program which were undertaken in concert with the RSAO. The IMPEP team has noted that the body of the state's training program is essentially equivalent to the body of IMC 1248, and issues remain with the appendices. Since the IMPEP, the appendices have been updated to incorporate NRC's concerns.	no	Washington worked in concert with the RSAO on their training procedure at the time of the on-site review and after the on-site review. No change is necessary. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (the end of the review period) to the MRB.E11
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7	Section 3.3.c, Technical Quality of Inspections, page 10 bottom of page, bulleted item	Every inspection performed by the state is focused on health, safety, and security. Medical licensees are often trying to accomplish several critical procedures at the same time. Nuclear medicine procedures are but one of the priorities in this setting. When delays occur, opportunities to observe nuclear medicine procedures are lost. To capture these situations, state recommends the wording be changed to read “Accompanied inspections of licensed activities occasionally ran short of time and did not encompass all normally observed evolutions.”	no	No change made. The team's observations stand. During the inspector accompaniments, the inspectors did not always prioritize higher risk inspection activities to observe.
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8	Section 3.3.c, Technical Quality of Inspections, page 11, 3rd paragraph below bullets	This UW irradiator source breach event was initially an observation and training event for new staff; not a pre-planned inspection. As the event progressed (after the state inspectors had left the site), the magnitude of the incident grew dramatically. The supporting documents (and entire visit) moved into the realm of an incident with immediate actions being taken by contractors, licensee, and state responders. Further documentation is located in the material gathered in support of operations during the recovery from the breached source. After action reviews and lessons learned from this incident have yielded new section/Office procedures reinforcing the efforts of staff on site for these types of service provider activities.	no	When an inspector arrives at a licensee's facility, there is a presumption of a regulatory oversight. Whether it is called a 'pre-planned inspection' or 'observation for training' does not relinquish the requirement to document the activity especially when there is an event. The team expected a written account by the inspectors and there was none. No change made.
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9	Section 3.3.c, Technical Quality of Inspections, page 11, 5th paragraph below bullets	State inspectors can learn from NRC & Agreement State examples of “basis for closing previous items of non-compliance”. Please provide examples (e.g., commitments in IONC, reply letters from licensee?) in the final report.	yes	Yes, we will provide additional language in the proposed final report for better clarity.
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10	Section 3.3.c, Technical Quality of Inspections, page 12, 2nd paragraph	Lack of annual supervisory accompaniments was identified by Washington state management in mid-2019 while the UW source breach incident was on-going and during the COVID-19 pandemic response. We will perform supervisory accompaniments in 2022 and annually afterwards. This requirement will be memorialized in the WDOH Human Resources Position Description for the Radioactive Materials Manager.	no	This appears to be informative only. No change to the report. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (the end of the review period) to the MRB.
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11	Section 3.4.b, Status of Materials Licensing Actions, page 14, top of page	The Quality Assurance (QA) form addresses this issue of identifying the incorrect activity for a gauge. Practice of authorizing non-requested gauge (with appropriate activity) has been done for many years (and several IMPEP's). Program has updated its templates and practices to NUREG 1556 standards.	no	IMPEP reviews do not find all of the performance issues because of the limited casework reviewed. It is understandable that this issue was not highlighted as a problem sooner. No change to the report. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (to the end of the review period) to the MRB.
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12	Section 3.4.b, Status of Materials Licensing Actions, page 14, "Non-standard license conditions"	<p>Since the IMPEP, Washington has adopted the NUREG 1556 standard license conditions. Any future non-standard conditions will be submitted to the NRC for approval. Changes made since the IMPEP include:</p> <ul style="list-style-type: none">•Page 15, top of page, checklist contains a line "IS HAND DELIVERY NEEDED?" This notation is no longer on the QA checklist and the practice was discontinued in 2018. Recommend removing this paragraph from the report.•Page 15, "Protection of Sensitive and Security-Related Information in the transmittal of Radioactive Materials License to Licensee"•Washington has changed its method of transmitting Cat 1 and 2 licenses. Transmittal is now via encrypted email with the encryption key sent by separate email. <p>These changes to our license conditions bring us into full compliance with the NRC's standard license conditions.</p>	no	<p>This appears to be informative only. No change to the report. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (the end of the review period) to the MRB.</p>
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13	Section 3.5 b Technical Quality of Incidents and Allegation Activities, Page 19, 1st bullet, near the middle of paragraph	In reference to the contaminated individuals, the initial decontamination was performed at a private residence by the Office's personnel. The two state employees provided 24-hour urine samples as well as whole body counts. Internal dose was assigned to one individual and this dose was submitted to our dosimetry vendor. The IMPEP Draft report state no records were available during the IMPEP review March. These results are considered medical records and are securely maintained by the RSO in a separate file since the incident at UW.	no	Prior to the IMPEP review, the IMPEP team informed the State that the University of Washington (aka Harborview) incident would be a focus of the review. Bioassay results or a summary of these results should have been provided to the IMPEP team. These were not included in the Joint report. The safety of the inspectors is as important as the safety of the public. Proper documentation is required when there is an event with radioactive uptakes. These records or a summary of the results should have been provided to the IMPEP team. No change in the report is needed.
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14	Section 4.1 b Legislation, Regulations, and Other Program Elements, Page 24, 5th paragraph (just above Evaluation)	<p>Washington noted its Appendices were not compatible with IMC 1248. Using Minnesota's Qualification Journal and the Draft Report as a guide, Washington has modified its Training Journal to address the inconsistencies.</p> <p>The IMPEP Team also noted that the Section Manager did not review 100% of the inspection reports in a timely manner as required in IMC 0610. This policy has been updated such that Section Manager will review all inspections report effective January 1st, 2022.</p> <p>Washington has adopted the use of standard conditions as listed in NUREG-1556. The state has submitted one non-standard license condition to the NRC's Reg. Resource for formal evaluation.</p> <p>Washington believes the deficiencies noted in our Other Program Elements are resolved, and thus we are currently in compliance with NRC requirements.</p>	no	<p>This appears to be informative only. No change to the report. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (the end of the review period) to the MRB.</p>
15	Section 4.1.c Evaluation, Page 24, 3rd bullet	<p>Please provide specific examples of "other program elements" that are non-compliant.</p>	no	<p>The report provides the examples. Management Directive (MD) 5.9, "Adequacy and Compatibility of Program Elements for Agreement State Programs," provides examples of other program elements.</p>

16	Section 4.2 b Sealed Source & Device Evaluation program discussion, Page 26, paragraph 2	The Materials program appreciates the insight received from the reviewer during the IMPEP review. The program is committed to staying active even though only minor activity occurred during this review period. As such management has committed to a training program compatible with the NRC's SS&D program (e.g., same program elements as stated in IMC 1248, Appendix D). A training class is scheduled in FY 2023, and we will be sending at least one new employee.	no	This appears to be informative only. No change to the report. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (the end of the review period) to the MRB.
17	Section 4.3 Low-Level Radioactive Waste (LLRW) Disposal Program, page 27	Under current structure Perma-Fix Northwest (PFNW), a radioactive waste processor is a Common Performance Indicator (e.g., broad scope radioactive materials licensee). However, based upon the complex nature of the waste processing that occurs at these facilities and the lack of presence in every state, waste processors, such as PFWN, should be considered a Non-Common Performance Indicator (NCPI). The NRC should create a new NCPI to capture these unique licensees.	no	Washington State places radioactive waste service providers in their waste section. Other agreement states treat them like other service providers. No change needed.

18	Section 4.3.b. Technical Staffing and Training, page 30, 2nd paragraph	<p>a. NRC statement “Washington’s WMS 102 procedure required that all technical staff complete a minimum of 24 hours of refresher training over a two-year interval. However, the team learned through interviews that this was not being completed for new staff.”</p> <p>It appears there was a misunderstanding in the question or the response during the interview. IMC 1248 requires refresher training for qualified staff; new staff are expected to complete their assignments in their training matrix. As shown below, all staff, who have been in Waste Management for at least two years, completed the refresher requirement whether qualified or not.</p> <p>i. Cheryl Rogers Training:</p> <ol style="list-style-type: none">1. 2018: 40 hours2. 2019: 81.5 hours3. 2020: 4 hours and 50 min4. 2021: 21 hours and 25 min <p>ii. Gregorio Rosado’s Training:</p> <ol style="list-style-type: none">1. 2018: 51 hours2. 2019: 93 hours3. 2020: 32 hours and 58 minutes4. 2021: 18 hours and 25 minutes <p>iii. Kristen Schwab’s Training:</p> <ol style="list-style-type: none">1. 2018: 70 hours2. 2019: 134 hours3. 2020: 17 hours and 50 minutes4. 2021: 39 hours and 25 minutes <p>iv. Sheila Pachernegg’s Training:</p> <ol style="list-style-type: none">1. 2018: 16 hours2. 2019: 26 hours3. 2020: 12 hours and 50 minutes4. 2021: 32 hours and 15 minutes	no	<p>The team discussed this with the Waste Section Supervisor that even though completing 24 hours of continuing education was required for qualified staff, Washington required it for all the staff. This is also listed in Washington's procedure. If Washington no longer requires it for all staff then the procedure needs to be revised.</p>
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19	Section 4.3.b. Technical Staffing and Training, page 30, 3rd paragraph	<p>a. NRC statement: “Washington was about to qualify a staff member who had not completed the required training courses.”</p> <p>b. Perhaps there was a misunderstanding in the question or the response:</p> <ol style="list-style-type: none">i. The Waste Section supervisor had planned on accompanying Gregorio Rosado in October 2021 to sign him off as a Lead Inspector. Due to the request from NRC for the Accompaniments to occur during this time frame, the sign-off plan was changed. Instead of the Supervisor accompanying Gregorio Rosado to sign him off, the NRC performed their accompaniment inspections.ii. Gregorio Rosado has taken the necessary course work to be qualified as a lead inspector. Gregorio Rosado is still awaiting acceptance into the Root Cause Analysis class. He has applied for the class numerous times.	no	Since the staff member stills needs to take a required course, the supervisory sign-off cannot be completed until after the successful completion of this course. As stated during the on-site IMPEP review, if there is an urgent training need, this should be brought to the attention of the RSAO. This appears to be informative only. No change to the report.
20	Section 4.3.b. Technical Quality of Incident & Allegation Activities, page 32, 3rd paragraph	<p>“appropriate manner” appears twice at the end of the first sentence. Recommend removing second occurrence.</p>	yes	Editorial error noted and the second occurrence of 'appropriate manner' will be deleted.

21	Section 4.3.b. Technical Quality of Incident & Allegation Activities, page 32, 4th paragraph	"LLWR" should be "LLRW"	yes	Typographical error noted and will be corrected.
22	Section 4.4.c Uranium Recovery Program, Page 38, 1st bullet	The IMPEP draft report states that the Uranium Recovery training and qualification programs for new technical staff were established but were not compatible with IMC 1248 Appendices (H & I). Training is a Compatibility Category C Program element, (from SA-200): "the essential objectives of which should be adopted by the State to avoid conflicts, duplications or gaps. The manner in which the essential objectives are addressed need not be the same as NRC, provided the essential objectives are met". Washington State has not had an operating uranium mill for over 20 years. Recent staff hiring/training has focused on the decommissioning aspects of uranium milling; specifically training on Alternate Concentration Limits (ACL's). Based upon the nearly decommissioned status of the Dawn Mining facility, we believe we have met the essential objectives.	no	Washington qualified the one inspector for uranium recovery before the inspector completed all required courses as stated in the WMS-201 and IMC-1248 Appendices H and I. The other uranium inspector was in training and not yet qualified. As stated in the report, to be compatible with IMC-248, Washington should ensure that the inspectors complete the self-study reading materials, including documentation of these readings and the completion of the required courses approved by management. No change needed.
23	Section 5.0, Summary, Page 40, Recommendation 8	The state acknowledges revisions are necessary to its Incident and Allegation (I&A) procedures. Management is committed to adopting another Agreement State's I&A procedures or those I&A procedures used by Waste Management.	no	This appears to be informative only. No change to the report. The State is more than welcome to provide the corrective actions they have taken since April 1, 2022 (the end of the review period) to the MRB.
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